Community Health Assessment and Group Evaluation

Community-At-Large Summary

COMMUNITY NAME: Eau Claire 2011

Module	Community					
	Year 1 (2010)		Year 2 (20	011)	Module %	Diff. (Yr. 1-Yr. 2)
	P E		P	Е	P I	E
Physical Activity	80.00%	71.01%	85.71%	71.01%	5.71%	0.00%
Nutrition	43.75%	46.88%	51.56%	53.03%	7.81%	6.15%
Tobacco Use	40.00%	36.36%	43.64%	36.36%	3.64%	0.00%
Chronic Disease Management	60.00%	64.44%	60.00%	64.44%	0.00%	0.00%
Leadership	89.09%	64.45%	98.18%	70.91%	9.09%	5.46%
Demographic Information						
Community Density - Population	66,000		66,000			
Community Density - Sq Miles	33.5		33.9			
Community Setting	Urban		Urban			
Median Household Income	\$35,000 - \$49,999	9 \$35	5,000 – \$49,	,999		
% No High School Diploma	10 – 14%		5 – 9%			
% Poverty	≥20%		15-19%			
% Unemployed	5-9%		<5%			

Legend:

Response #	Policy	Environment
1	Not identified as problem	Elements not in place
2	Problem identification/gaining agenda status	Few elements in place
3	Policy formulation and adoption	Some elements are in place
4	Policy implementation	Most elements are in place
5	Policy evaluation and enforcement	All elements in place

Community-At-Large: Physical Activity	2010		2011	
To what extent does the community?	Policy Response #	Environment Response #	Policy Response #	Environment Response #
 Require sidewalks to be built for all developments (e.g., housing, schools, commercial)? Adopt a land use plan? 	5 5	4 5	5 5	4 5
3. Require bike facilities (e.g., bike boulevards, bike lanes, bike ways, multi-use paths) to be built for all developments (e.g., housing, schools, commercial)?	2	2	3	2
4. Adopt a complete streets plan to support walking and biking infrastructure?5. Maintain a network of walking routes (e.g., institute a sidewalk program to fill gaps in the	2	2	2	2
sidewalk)? 6. Maintain a network of biking routes (e.g., institute a bike lane program to repave bike lanes	2	3	5	3
when necessary)? 7. Maintain a network of parks (e.g., establish a program to repair and upgrade existing parks	5	3	5	3
and playgrounds)? 8. Provide access to parks, shared-use paths and trails, or open spaces within reasonable	5	4	5	4
walking distance of most homes? 9. Institute mixed land use?	5 4	4 3	5 4	4 3
10. Require sidewalks to comply with the Americans with Disabilities Act (ADA) (i.e., all routes accessible for people with disabilities)?	5	4	5	4
11. Provide access to public recreation facilities (e.g., parks, play areas, community and wellness centers) for people of all abilities?	5	4	5	4
12. Enhance access to public transportation (e.g., bus stops, light rail stops, van pool services, subway stations) within reasonable walking distance?	5	4	5	4
13. Provide street traffic calming measures (e.g., road narrowing, central islands, roundabouts, speed bumps) to make areas (e.g., neighborhoods, major intersections) where people are or could be physically active (e.g., walk, bike) safer?	5	3	5	3
14. Adopt strategies (e.g., neighborhood crime watch, lights) to enhance personal safety in areas (e.g., playgrounds, parks, bike lanes, walking paths, neighborhoods) where people are				
or could be physically active (e.g., walk, bike)?	1	4	1	4
COLUMN TOTAL:	56	49	60	49
PHYSICAL ACTIVITY SCORE: Module % Diff. (Yr. 1-Yr. 2)	80%	71%	85.71% 5.71%	71% 0%

Community-At-Large: Nutrition	2010		2011	
To what extent does the community?	Policy Response #	Environment Response #	Policy Response #	Environment Response #
1. Adopt strategies to encourage food retailers (e.g., grocery, corner or convenience stores; bodegas) to provide healthy food and beverage options (e.g., fresh produce) in				
underserved areas?	2	2		
2. Encourage community gardens?	3	3	3	3
3. Enhance access to public transportation (e.g., bus stops, light rail stops, van pool services, subway stations) to supermarkets and large grocery stores?	1	1	1	3
4. Provide access to farmers' markets?	5	4	5	
5. Accept Women, Infants and Children (WIC) Farmers' Market Nutrition Program vouchers or	2	2		2
Food Stamp Benefits at local farmers' markets?	2	2		
6. Connect locally grown foods to local restaurants and food venues?	1	3	1	3
7. Promote (e.g., signage, product placement, pricing strategies) the purchase of fruits and vegetables at local restaurants and food venues?	2	2	2	2
8. Institute healthy food and beverage options at local restaurants and food venues? 9. Institute nutritional labeling (e.g., 'low fat,' 'light,' 'heart healthy,' 'no trans fat') at local	2	2	2	2
restaurants and food venues?	2	2	2	2
10. Provide smaller portion sizes at local restaurants and food venues?	1	1	1	1
11. Ban local restaurants and retail food establishments from cooking with trans fats?	1	2	1	2
12. Adopt strategies to recruit supermarkets and large grocery stores in underserved areas (e.g., provide financial incentives, lower operating costs, provide job training services)?	2	2	4	3
13. Provide comfortable, private spaces for women to nurse or pump in public places (e.g., government buildings, restaurants, retail establishments) to support and encourage				
residents' ability to breastfeed?	2	2		
14. Protect a woman's right to breastfeed in public places?	2	2	_	
COLUMN TOTAL: NUTRITION SCORE:	28 43.75%	30 46.88%		
Module % Diff. (Yr. 1-Yr. 2)	+3.7370	40.0070	7.81%	

Community-At-Large: Tobacco	2010		2011	
To what extent does the community?	Policy	Environment	Policy	Environment
10 What extent does the community?	Response #	Response #	Response #	Response #
1. Institute a smoke-free policy 24/7 for indoor public places?	5	5 5	5 5	5
2. Institute a tobacco-free policy 24/7 for indoor public places?	1	1	2	! 1
3. institute a smoke-free policy 24/7 for outdoor public places?	2	! 1	2	! 1
4. Institute a tobacco-free policy 24/7 for outdoor public places?	1	1	2	! 1
5. Ban tobacco advertisement (e.g., restrict point-of-purchase advertising or product				
placement)?	1	1	1	1
6. Ban tobacco promotions, promotional offers, and prizes?	1	1	1	1
7. Regulate the number, location, and density of tobacco retail outlets?	1	1	1	1
8. Restrict the placement of tobacco vending machines (including self-service displays)?	4	. 3	3 4	3
9. Enforce the ban of selling single cigarettes?	1	1	1	1
10. Increase the price of tobacco products and generate revenue with a portion of the				
revenue earmarked for tobacco control efforts (e.g., taxes, mitigation fees)?	1	1	1	1
11. Provide access to a referral system for tobacco cessation resources and services, such as				
a quitline (e.g., 1-800-QUIT-NOW)?	4	. 4	4	. 4
COLUMN TOTAL:	22	20) 24	20
TOBACCO USE SCORE:	40.00%	36.36%	43.64%	36.36%
Module % Diff. (Yr. 1-Yr. 2)			3.64%	0.00%

Community-At-Large: Chronic Disease Management	2010		2011	
To what out out does the community of	Policy	Environment	Policy	Environment
To what extent does the community?	Response #	Response #	Response #	Response #
 Enhance access to chronic disease self-management programs (e.g., Weight Watchers for overweight/obesity)? Adopt strategies to educate its residents on the importance of obesity prevention? Adopt strategies to educate its residents on the importance of controlling high blood 	1	3	3 3	3 3
pressure?	3	3	3	3
4. Adopt strategies to educate its residents on the importance of controlling cholesterol?5. Adopt strategies to educate its residents on the importance of controlling blood sugar or	3	3	3	3
insulin levels? 6. Adopt strategies to educate its residents on heart attack and stroke symptoms and when	3	3	3	3
to call 9-1-1?	3	3	3	3
7. Adopt strategies to educate its residents on the importance of preventive care?	3	3	3	3
8. Provide emergency medical services (e.g., 9-1-1, transport system)?	5	5	5 5	5
9. Adopt strategies to address chronic disease health disparities?	3	3	3	3
COLUMN TOTAL:	27	29	27	29
CHRONIC DISEASE MANAGEMENT SCORE: Module % Diff. (Yr. 1-Yr. 2)	60.00%	64.44%	60.00% 0.00%	

Community-At-Large: Leadership	2010)	2011		
To what extent does the community?	Policy	Environment	Policy	Environment	
Participate in community coalitions and partnerships (e.g., food	Response #	Response #	Response #	Response #	
policy council, tobacco-free partnership, neighborhood safety					
coalition) to address chronic diseases and related risk factors (e.g.,	5	5	3 5	3	
2. Participate in the public policy process to highlight the need for					
community changes to address chronic diseases and related risk					
factors (e.g., poor nutrition, physical inactivity, tobacco use and	5	5	3 5	3	
3. Finance public shared-use paths or trails (by passing bonds, passing					
millages, levying taxes or getting grants)?	4	1 4	1 5	4	
4. Finance public recreation facilities (by passing bonds, passing millages, levying taxes or getting grants)?	4	ļ	1 5	1	
5. Finance public parks or greenways (by passing bonds, passing	4	•	t 3	4	
millages, levying taxes or getting grants)?	4	1 4	1 5	4	
6. Finance public sports facilities (by passing bonds, passing millages,					
levying taxes or getting grants)?	4	1 4	1 5	5	
7. Finance pedestrian enhancements (e.g., sidewalks, street crossing	5	5	1 5	4	
8. Finance bicycle enhancements (e.g., bike lanes, bike parking, road	I 4	1 2	2 5	3	
9. Address the community's operating budget to make walking,					
bicycling, or other physical activities a priority?	4	·		3	
10. Promote mixed land use through regulation or other incentives?	5				
11. Institute a management program to improve safety within the	5				
COLUMN TOTAL: LEADERSHIP SCORE:	49 89.09%				
Module % Diff. (Yr. 1-Yr. 2)	09.09%	00.40%	98.18% 9.09%		
Weddie 70 Bill. (11. 1 11. 2)			7.0770	3.1070	



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Hospitals and local Health Departments must conduct a Community Health Needs Assessment (CHNA) once every three and five years, respectively, and develop a plan to meet the health needs of the community.

In June the Eau Claire City-County Health Department formed a Community Health Needs Assessment team of community representatives to:

- Review health conditions and their modifiable risk factors which impact community residents.
- Identify community strengths and resources which can be built upon to address given health conditions.
- Prioritize health conditions which impact residents.
- Develop goals, measurable objectives, and implementation strategies to address the top health priorities.
- Incorporate health-plan goals and strategies into day-to-day activities of community partners.
- Annually review progress on goals, objectives, and strategies.

In September 2012 the Eau Claire City-County Health Department launched a "Community Health Status Survey" as part of Eau Claire County's Health Improvement Planning process. The survey was developed and conducted to better understand the health issues in Eau Claire County and ways to address them. This voluntary, anonymous and confidential survey was intended for anyone who resides in Eau Claire County. Paper copies and an online link were provided as a means for community members to take the survey.

The questions in the survey were based on the 12 health focus areas of Wisconsin's state health plan. For each health area, we asked participants to answer how it affects "you or your family" and share ideas about what would help.

As gathered from the 626 "Community Health Status Survey" responses the top Health Areas that are most in need of improvement in Eau Claire County (in no particular order) include:

- Physical activity
- Healthy nutrition
- Mental health
- Alcohol and drug use

The "Community Health Status Survey" revealed these built environment related issues:

- Lack of neighborhood grocery stores with fresh/whole food
- Would like more transportation options for safe rides (alcohol related)
- Rivers/lakes used for fishing, swimming and play are not always safe
- Many workers not satisfied with the building conditions they work in
- Too many trails across roadways EC motorists are not biker friendly
- Would like to see more downtown activities and businesses that can be walked to
- More trails/paths
- Trail/path maps
- Ability to use a school or nearby building for exercise
- More public exercise equipment
- Alcohol is easily available
- Secondhand smoke is an issue outdoors and in living spaces

In October Eau Claire County Community Service Providers were asked to complete a "Community Health Survey" from the perspective as a provider of services to individuals and/or families in Eau Claire County. This survey was separate from the similar survey conducted from the perspective of "you and your family". For a thorough assessment, we have conducted two surveys, seeking information on the viewpoints of both residents and service providers in Eau Claire County. Results from this survey are still being collected and evaluated.

In March the Community Health Needs Assessment team will unveil the survey results and build an action plan based on survey results and community needs. The Comprehensive Plan Health Chapter will also help aid in developing this plan.

PARKS SURVEY



EXECUTIVE SUMMARY

In 2011, the City of Eau Claire Parks, Recreation and Forestry Department contracted with the Solutions Resource Center at the University of St. Francis to complete a community wide survey. Survey data was collected between April 11, 2011 and July 1, 2011. Survey analysis was completed in August 2011.

The analysis explained in this report includes compilation of data and open ended comments, comparison data with the community wide survey conducted in 2006 and cross tabulation of data to identify trends.

Over 600 community members responded to the survey either via telephone or through direct mail.

The survey questions were categorized into six general areas:

- (1) Satisfaction/Safety
- (2) Communication
- (3) Facilities/Parks/Services
- (4) Funding
- (5) Parks Department Decisions
- (6) Demographics.

Highlights of the survey data include:

- The community respondents rate parks and recreation facilities as good or excellent.
- Respondents feel very safe in city parks, trails and recreation facilities.
- The highest used facilities are: trails and bikeways and large community parks.
- Printed materials are the preferred method to receive information on City of Eau Claire recreation programs, facilities and services.
- About half of the survey respondents have never visited the City of Eau Claire website.
- The vast majority of respondents have never visited the City of Eau Claire Parks and Recreation Facebook page even though many indicated they use Facebook.
- The community has a <u>high interest</u> in supporting walking trails, biking trails and hiking trails.
- Survey respondents feel the most important services and facilities are: trash and recycling
 in park, restroom in parks and youth sports programs
- The vast majority of survey respondents indicate they were aware there is an insect that is
 predicted to wipe out the ash tree population in Eau Claire, but the response was mixed
 on what, if any, action should be taken.
- Park facilities should be named for geographic areas and events or people of historical significance.
- Over half of survey respondents are in favor of having the City Parks Department continue to use chemicals to treat the water in Half Moon Lake.
- Of those who support the winter recreation area and who responded with a choice of location, the data indicates Pinehurst as the preferred location. (\(\subseteq \text{if } \)

- Of those who have an opinion on Fairfax Pool, the most desired amenities are: more picnic and shade areas should be added.
- Respondents feel there is about the right amount of various parks and recreation facilities in the area and they support continued City funding for all of the park and recreation facilities listed in the survey.
- There is strong support for funding for neighborhood parks and playgrounds and community parks.
- The majority of survey respondents indicate Eau Claire city <u>parks should be tobacco free.</u>
 Nearly half of survey respondents prefer the City Parks Department to use organic based
- herbicides even though they cost more.

 Respondents support fixing up existing park and recreational areas. There is very little
- Respondents support fixing up existing park and recreational areas. There is very little support to purchase more parkland.
- Respondents support continuing to have City Parks and Recreation maintain all park areas at current levels.
- Respondents also support encouraging citizen volunteer groups to assist in the maintenance and upkeep of park areas, such as through an 'adopt a park' program, to reduce operating expenses.
- Nearly half support the requirement that boaters pay a fee to use the boat launch facilities.
 Respondents support allowing community gardens to develop in city parks.
- Respondents support coordination with area non-profit organizations.
- The majority of non-city respondents oppose or strongly oppose a small increase in their property taxes to pay for recreational programs and facilities.
- Comparison analysis of the 2006 survey with the 2011 survey indicates the general trends of important services and facilities remain the same.

The following report outlines a narrative analysis of significant factors; visual results detailing percentages and tabulation of results; cross tabulation analysis of key correlations; comparison data with 2006 survey results and the listing of all open ended comments received by the Solutions Resource Center at the University of St. Francis.

Health Department and Planning Division Input

The Health Department and Community Development, Planning Division has also listed potential/existing issues that could be evaluated for policy development in the new Health Chapter. Some of these topics have been also noted in the Plan Commission memo and the feedback staff gained from the October 18th, 2012 public meeting.

Proposal, Project, Program and Policy Development

- Build local capacity to conduct Health Impact Assessments of new proposals, projects, programs and
 policies. Consider requiring Health Impact Assessments (HIAs) or integrate HIAs into the city review
 and approval processes before certain policies, programs or development/public infrastructure
 projects are approved. Examples of this could be to provide guidance on potentially contaminating
 land uses within residential areas/natural resources, or to look at how a new multi-lane highway
 could affect human health ranging from air and noise pollution to pedestrian crossing safety.
- Consider reviewing building codes/enforcement on common occupational health concerns (i.e. poor indoor air quality for buildings and schools).
- Consider affordable housing strategies such as including a portion of low-income housing in new developments or mixed use projects and/or increase public housing assistance to meeting the growing list of low-income individuals waiting for housing.
- Further expand research/policies on life-cycle housing within neighborhoods and workforce housing near places of employment (e.g. provide a variety of housing types and homes styles that lend well to people's different life-stages. Possibly provide affordable housing near service businesses to reduce their commute costs).
- Increase developer education/incentives to build more mixed-use and compact development projects.
- Design, build and locate new developments to maximize access to needed services, reduce urban sprawl and encourage walking and bicycling, and reduce auto dependency.
- Enhance funding for Intensified Housing Maintenance Code enforcement to eliminate safety and health hazards such as lead based paint, asbestos, radon, and physical safety hazards.
- Consider strategies to reduce Vehicles Mile Traveled (VMT) such as encouraging ride share, commuter choice programs, flex hours, better transit access, workforce housing and smart growth.

Nutrition

- Research the County Health Rankings results for why Eau Claire had the highest density of fast food restaurants of all counties in the State. Study the relationship between fast food outlet density, nutritional intake and obesity.
- Conduct an assessment to determine if food deserts (lack of fresh fruit and vegetables within a
 specific distance of residential areas) exist in the community. Research the number of and access to
 healthy/local foods (e.g. farmer's market, community gardens, school gardens, grocery stores selling
 fruits and vegetables and locally produced foods).
- Consider urban husbandry solutions to increase local food production and access.
- Assess whether transportation barriers prevent access to farmer's markets.
- Encourage area grocery stores who offer gasoline savings incentives to place the majority of these offers on fresh fruit, vegetables, low carb and high fiber foods.

Drug Prevention & Control

- Eliminate exposure of the public second hand smoke in city parks and recreation facilities by designating them as smoke free.
- Require all new multi-unit housing developments approved by the city to be smoke free.
- Research alcohol usage and the number/density of alcohol selling establishments in the City and how that affects human health.

Crime Prevention & Safety

• Consider "Crime Prevention through Community Design" policies. (e.g. evaluate grade sightlines for pedestrian underpasses, locating entrances/shelters that are in public view, etc.)

Physical Activity

- Research the community's physical activity resources to assess any problems such as lack of access or infrastructure which would encourage more active living.
- Review the current status of the safe routes to school program in the city and expand routes to wherever they are needed in the community.
- Work with the UWEC, private and public school districts to create alternate uses of facilities to create physical exercise activity opportunities for the public.

Environmental Exposures

- Broaden brownfield cleanup strategies of polluted land for redevelopment or underutilized sites.
 Take advantage of Federal and State assistance more.
- Map locations of possible contaminated sites within the city and how they might affect human health.

Emergency Preparedness & Response

- Consider Climate Change adaptation strategies such as dealing with extreme weather events/periods.
- Address possible "urban heat zones" in the city which can possibly lead to ill health effects (places where buildings and infrastructure such as pavement increase the ambient air temperature).
- Develop a policy and procedural approach to establish designated cooling centers in the city of Eau
 Claire to provide a safe alternative to at risk persons and populations.